



CITY OF BLACK DIAMOND

Physical Address: 24301 Roberts Drive
Mailing Address: PO Box 599
Black Diamond, WA 98010

Phone: (360) 851-4500
Fax: (360) 851-4501
www.ci.blackdiamond.wa.us

2020 Lifeline Discount Residency Verification Form

Rent or Lease of:

Multi-Family Home Apartment Mobile Home Park
Duplex ADU Single Family Residence

Applicant Name(s) on Rent/Lease:

1. Name(s) _____ Unit # _____

2. Property Owner/Company Name _____

Property Address _____

The undersigned certifies, subject to the penalties of perjury, that:

1. The Applicant(s) listed above has/have THE RENTAL AGREEMENT OR LEASE IN THEIR NAME(S) at the address and unit number indicated above.
2. The Applicant(s) has/have lived at the property above for _____ month(s).
3. The Owner or Property Manager agrees to pass the Lifeline discount on to the tenant.

Property Management or Owner:
(Photocopied signatures will not be accepted.)

Print Name: _____

Office Phone Number: _____

Email: _____

Signature: _____